

Appl. No. 10/790,903

Amdt.AF dated February 17, 2006

Reply to Final Office Action of December 27, 2005

Amendments to the Claims

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims

1-79. (cancelled)

80. (previously presented) A method of implanting a subcutaneous cardioverter-defibrillator in a patient, the method comprising:

providing a subcutaneously implantable cardioverter-defibrillator including an electrically active canister that serves as either an anode or a cathode of the cardioverter-defibrillator, wherein the canister houses a source of electrical energy, a capacitor, and operational circuitry, and the cardioverter-defibrillator further includes a subcutaneous lead connected to the canister, the lead including a subcutaneous cardioversion-defibrillation electrode that serves as the opposite electrode from the canister such that electrical cardioversion-defibrillation energy is delivered between the subcutaneous electrically active canister and the subcutaneous cardioversion-defibrillation electrode;

inserting the subcutaneous canister in a predetermined subcutaneous position within the thorax of the patient;

inserting the subcutaneous lead in a predetermined subcutaneous path extending around a portion of the thorax of the patient so that the cardioversion-defibrillation electrode is positioned such that electrical cardioversion-defibrillation energy is delivered to the heart of the patient when electrical cardioversion-defibrillation energy is delivered between the subcutaneous electrically active canister and the subcutaneous cardioversion-defibrillation electrode.

81. (previously presented) The method of claim 80, wherein inserting the subcutaneous lead includes using a curved introducer to make the subcutaneous path, and inserting the lead into the subcutaneous path.

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82. (previously presented) The method of claim 80, wherein inserting the subcutaneous canister and inserting the subcutaneous lead includes:

making a skin incision in the thoracic region of the patient;

inserting a curved introducer through the skin incision to make a subcutaneous path in the thoracic region such that the a portion of the path is disposed at a location that if a straight line were drawn from the skin incision to the path termination the line would intersect the heart of the patient;

inserting the lead into the subcutaneous path such that the cardioversion-defibrillation electrode is disposed within the portion of the path;

placing the canister subcutaneously at the skin incision point; and

closing the skin incision.

83. (previously presented) A method of providing anti-arrhythmia therapy to a patient having a heart, the method comprising:

providing a subcutaneous implantable cardioverter-defibrillator including a subcutaneous electrically active canister that serves as either an anode or a cathode of the cardioverter-defibrillator, wherein the canister houses a source of electrical energy, a capacitor, and operational circuitry, the cardioverter-defibrillator further including a subcutaneous lead connected to the canister, the lead including a subcutaneous cardioversion-defibrillation electrode spaced from the canister that serves as the opposite electrode from the canister;

inserting the subcutaneous canister in a predetermined subcutaneous position within the thorax of the patient;

inserting the subcutaneous lead in a predetermined subcutaneous path extending around a portion of the thorax of the patient such that the cardioversion-defibrillation electrode is positioned at a subcutaneous location spaced from the canister; and

delivering electrical cardioversion-defibrillation energy to the heart of the patient between the subcutaneous electrically active canister and the subcutaneous cardioversion-defibrillation electrode.

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84. (previously presented) The method of claim 83, wherein inserting the subcutaneous lead includes using a curved introducer to make the subcutaneous path, and inserting the lead into the subcutaneous path.

85. (previously presented) The method of claim 83, wherein inserting the subcutaneous canister and inserting the subcutaneous lead includes:

making a skin incision in the thoracic region of the patient;

inserting a curved introducer through the skin incision to make a subcutaneous path in the thoracic region such that the a portion of the path is disposed at a location that if a straight line were drawn from the skin incision to the path termination the line would intersect the heart of the patient;

inserting the lead into the subcutaneous path such that the cardioversion-defibrillation electrode is disposed within the portion of the path;

placing the canister subcutaneously at the skin incision point; and

closing the skin incision.